

**Service Area Quality Improvement Project Summary - CY 2014
Family Engagement and Inclusion**

During Calendar Year (CY) 2013, Parameters of Family Engagement and Inclusion for Adults were developed by the Office of the Medical Director (OMD) in collaboration with the Office of Family Engagement (OFE), Adult Systems of Care (ASOC) through a stakeholder process involving key stakeholder groups.

OFE presented the request to form a workgroup for the purpose of establishing guidelines for Family Engagement and Inclusion at the Clinical Policy Committee (CPC) meeting of OMD on March 27, 2013. The committee approved the process and recommended that the work group focus initially on Parameters of Practice as a foundation for DMH to have guidance for clinicians. Four subsequent workgroups were initiated to develop the Parameters of Family Engagement and Inclusion for Consumers and their families. Stakeholders were invited to attend all work groups from Institute for Mental Diseases (IMD), Public Guardian (PG), MH Court Linkage, Partners in Suicide Prevention (PSP), System Leadership Team (SLT), Jail MH, ASOC, Client Coalitions, Children's System of Care (CSOC), Older Adult System of Care (OASC), Transitional Age Youth (TAY), OMD, Health Insurance Portability and Accountability Act (HIPAA) Privacy Officer, Patient Rights Office (PRO), National Alliance for Mentally Ill (NAMI), Mental Health Advocacy Legal Service and United Advocates for Children and Families (UACF). Several additional stakeholders were invited to attend including Dr. Christopher Amenson who is an expert on family inclusion in treatment of Serious Mental Illness (SMI) for the adult population and Mary Kay Oliveri who is an expert in family inclusion for the children population. All stakeholders provided valuable feedback via email/phone/ in person meetings for the Parameter completion. The final version of the Parameter was proposed to the Clinical Policy committee and published in January 2014.

The goal was to develop and establish Practice Parameters and Guidelines to assist mental health professionals in their clinical practice related to Family Engagement and Inclusion for Adults. The parameters explain how client families are often potential sources of social and emotional support, and how this role should be addressed in all service delivery and the importance of encouraging a client to involve his/her family in treatment unless the clinician believes it is contraindicated. These parameters also highlight how clients' family members can be key resources in allowing clinicians to provide comprehensive assessment and quality treatment, and should be invited and encouraged to participate in these activities, whenever it is consistent with the wishes of the client. Further, they address how clients' families have a unique relationship with the mental health systems and professionals who provide care to their family member, and how staff should appropriately address the needs of the family that stem from this relationship. They also indicate that staff should have the skills to clinically, ethically,

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and legally balance client autonomy with family inclusion as appropriate in the assessment and psychotherapeutic interventions of clients including the abilities to weigh values of client choice, family focus, privacy, and public safety.

The Parameters of Family Engagement and Inclusion for Adults also provide staff guidance on how to gather and document relevant clinical information regarding family in assessment and services delivery for individual clients; properly include a client's family members in assessment and service delivery; and assess and address the needs of a client's family.

The Parameters of Family Engagement and Inclusion for Adults were presented to the Departmental Quality Improvement Council (QIC) in March 2014 by OFE and were very well received by QIC members. Service Area QIC Chairs and Co-Chairs expressed an interest in collaborating on a SA QIC project focusing on "Family Engagement and Inclusion". In July 2014, a Service Area QI Project was initiated by the Program Support Bureau -Quality Improvement Division (PSB-QID) in collaboration with OFE.

Trainings related to these parameters were conducted by OFE between July 2014 and November 2014 at all SA QIC meetings and at a few Executive Provider meetings per the request of the SAs. This 40-minute training was designed to increase clinicians' awareness and knowledge of including family members in adult consumers' treatment as appropriate and with consent from the consumer. The training also provided scripts to assist clinicians with appropriate responses to families of consumers who called inquiring about the consumer even in situations when clients did not authorize to involve family in their treatment.

A baseline survey was developed with input from OFE and QID to assess clinicians' awareness and knowledge of including consumers' family members as a key resource for their treatment, as well as their comfort level and confidence in involving adult family members in their consumers' treatment. QID staff administered this baseline survey to participants prior to the trainings at each SA QIC meeting and Provider meetings. A web survey using the VOVICI tool was launched three months post training to participants who completed the baseline survey. Reminders were sent by QID and the SA QIC Chairs to the participants to complete the post survey before the final deadline for data analysis. Preliminary pre-post survey results were presented initially at the January 2015 Departmental QIC meeting and the matched pair results were reviewed again at the March 2015 QIC meeting. A total of 226 participants completed the baseline survey and the highest number of respondents on the post survey was 78.

Baseline survey analysis in January 2015 showed that only 29% of clinicians responded to calls and contact initiated by consumers' family members in the past three months, when a consumer declined to give authorization. In addition, when a consumer provided consent for family involvement in treatment, only 26% of the clinicians

“Always” did so. Only 61% of clinicians were “Completely Confident” about including adult family members in a consumer’s treatment. In addition, only 11% of clinicians “Always” referred families to psycho-educational classes, irrespective of consumer authorization to include their family in treatment. These results indicated a need for training and quality improvement in this area.

A matched pair analysis was conducted in March 2015 to examine improvement in the staff awareness and knowledge of including clients’ family members as a key resource for their treatment, as well as their comfort level and confidence in involving adult family members in their consumers’ treatment.

Matched pair analysis of 78 survey respondents showed a significant increase (21.8% from baseline to post training, $P<0.05$) in the number of clinicians who reported responding to calls and contact initiated by a consumer’s family member when the consumer declines to give authorization to include families. The analysis also showed a significant increase (25.3% from baseline to post training, $P<0.05$) in the number of respondents reporting they are “Completely Confident” in their ability to include family in treatment. These results demonstrate the effectiveness of the training in encouraging clinicians to better respond to calls from families in an appropriate manner irrespective of client authorization to include family in treatment and to include in treatment the families of consumers.

Staff who participated in the training expressed that the scripts offered during this training were helpful in appropriately responding and returning calls from family members even when the client decline to authorize family to be included. Overall, this SA QI project highlights the importance of family engagement and inclusion in the treatment of adult clients and also the need for continued training in this area. The Office of Family Engagement has recently been consolidated (December 2014) with the Office of Client Empowerment and Advocacy and is now called the Office of Consumer and Family Affairs. QID will continue to collaborate with the Office of Consumer and Family Affairs to address the need for continued training for DMH staff in the area of Family Engagement and Inclusion and share the results of the SA QI project with SA QICs and DMH management.

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**FAMILY ENGAGEMENT AND INCLUSION
MATCHED PAIR EVALUATION SUMMARY
(N = 78)
MARCH 2015**

TABLE 1

Q1: WHEN IT IS CONSISTENT WITH THE WISHES OF THE CLIENT, DO YOU BELIEVE THAT A CLIENT'S FAMILY CAN BE A KEY RESOURCE?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Strongly Disagree	0	0.0%	0	0.0%	
Disagree	0	0.0%	0	0.0%	
Undecided	0	0.0%	0	0.0%	
Agree	15	20.0%	11	14.7%	
Strongly Agree	60	80.0%	64	85.3%	
Total	75	100.0%	75	100.0%	

Q2: WHEN IT IS CONSISTENT WITH THE WISHES OF THE CLIENT DO YOU BELIEVE THAT IT IS IMPORTANT TO ADDRESS THE NEEDS OF THE FAMILY?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Strongly Disagree	0	0.0%	0	0.0%	
Disagree	0	0.0%	0	0.0%	
Undecided	0	0.0%	0	0.0%	
Agree	24	32.0%	25	33.3%	
Strongly Agree	51	68.0%	50	66.7%	
Total	75	100.0%	75	100.0%	

Q3: DO YOU BELIEVE IT IS IMPORTANT TO UNDERTSAND THE CULTURAL CONTEXT, RELEVANCE AND DIFFERENCES IN FAMILY RELATIONSHIPS?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Strongly Disagree	0	0.0%	0	0.0%	
Disagree	0	0.0%	0	0.0%	
Undecided	0	0.0%	0	0.0%	
Agree	9	11.5%	8	10.3%	
Strongly Agree	69	88.5%	70	89.7%	
Total	78	100.0%	78	100.0%	

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**FAMILY ENGAGEMENT AND INCLUSION
MATCHED PAIR EVALUATION SUMMARY
(N = 78)
MARCH 2015**

TABLE 1

Q4: IN THE LAST 3 MONTHS: WHEN CLIENT DECLINED TO GIVE AUTHORIZATION TO INCLUDE FAMILY MEMBERS, DID YOU RESPOND TO CALLS AND CONTACT INITIATED BY CLIENT'S FAMILY MEMBER?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Yes	14	25.5%	26	47.3%	
No	27	49.1%	29	52.7%	
Sometimes	14	25.5%			
Total	55	100.0%	55	100.0%	

Q5: IN THE PAST THREE MONTHS IF CLIENT PROVIDED CONSENT FOR FAMILY INVOLVEMENT IN TREATMENT, HOW OFTEN DID YOU INVOLVE ADULT FAMILY MEMBERS IN CLIENT TREATMENT?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	Not Significant P>0.05
Never (0%)			6	9.4%	
Rarely (1%-39%)	6	9.4%	1	1.6%	
Sometimes (40%-79%)	15	23.4%	12	18.8%	
Often (80%-99%)	33	51.6%	28	43.8%	
Always (100%)	10	15.6%	17	26.6%	
Total	64	100.0%	64	100.0%	

Q6: IRRESPECTIVE OF A CLIENT'S AUTHORIZATION TO INCLUDE A FAMILY MEMBER IN TREATMENT, BASED ON YOUR CURRENT KNOWLEDGE TRAINING AND EXPERIENCE, HOW CONFIDENT ARE YOU IN INCLUDING FAMILY IN CLIENT TREATMENT?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Not at all confident	0	0.0%	0	0.0%	
Unsure	0	0.0%	0	0.0%	
Little Confidence	0	0.0%	0	0.0%	
Some Confidence	36	50.7%	18	25.4%	
Completely Confident	35	49.3%	53	74.6%	
Total	71	100.0%	71	100.0%	

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**FAMILY ENGAGEMENT AND INCLUSION
MATCHED PAIR EVALUATION SUMMARY
(N = 78)
MARCH 2015**

TABLE 1

Q7: HOW AWARE ARE YOU OF COMMUNITY PSYCHO-EDUCATIONAL CLASSES IN YOUR AREA?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
None	2	2.7%	3	4.1%	
Very Little Awareness	12	16.2%	11	14.9%	
Somewhat Aware	31	41.9%	25	33.8%	
Aware	18	24.3%	23	31.1%	
Very Aware	11	14.9%	12	16.2%	
Total	74	100.0%	74	100.0%	

Q8: IN THE PAST THREE MONTHS IRRESPECTIVE OF CLIENT AUTHORIZATION TO INCLUDE THEIR FAMILY IN TREATMENT, HOW OFTEN DID YOU REFER FAMILIES TO AVAILABLE PSYCHO-EDUCATIONAL CLASSES?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	P<0.05
Never (0%)	4	6.1%	19	28.8%	
Rarely (1%-39%)	9	13.6%	7	10.6%	
Sometimes (40%-79%)	26	39.4%	18	27.3%	
Often (80%-99%)	19	28.8%	12	18.2%	
Always (100%)	8	12.1%	10	15.2%	
Total	66	100.0%	66	100.0%	

Q9: IN THE PAST THREE MONTHS IRRESPECTIVE OF CLIENT AUTHORIZATION TO INCLUDE THEIR FAMILY IN TREATMENT, HOW OFTEN DID YOU PROVIDE FAMILIES WITH EDUCATIONAL MATERIALS ON MENTAL HEALTH AND FAMILY RELATIONSHIPS?					
Response	Pre		Post		Statistical Significance
	N	%	N	%	Not Significant P>0.05
Never (0%)	4	6.3%	18	28.6%	
Rarely (1%-39%)	2	3.2%	5	7.9%	
Sometimes (40%-79%)	27	42.9%	17	27.0%	
Often (80%-99%)	26	41.3%	17	27.0%	
Always (100%)	4	6.3%	6	9.5%	
Total	63	100.0%	63	100.0%	

Note: In January 2015 out of 226 Baseline (Pre) Survey respondents, 71 had completed the follow-up (Post) Survey. By March 2015, 92 baseline survey respondents had completed the follow-up (Post) Survey of which 78 surveys had complete data for Matched Pair Analysis.

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**FAMILY ENGAGEMENT AND INCLUSION
PRE (N = 226) AND POST(N = 71) EVALUATION SUMMARY**

JANUARY 2015

TABLE 2

Q1: WHEN IT IS CONSISTENT WITH THE WISHES OF THE CLIENT, DO YOU BELIEVE THAT A CLIENT'S FAMILY CAN BE A KEY RESOURCE?										
	Strongly Agree		Agree		Undecided		Disagree		Total	
	N	%	N	%	N	%	N	%	N	%
PRE	172	76.4%	50	22.2%	2	0.9%	1	0.4%	225	100%
POST	61	85.9%	10	14.1%	0	0.0%	0	0.0%	71	100%

Q2: WHEN IT IS CONSISTENT WITH THE WISHES OF THE CLIENT DO YOU BELIEVE THAT IT IS IMPORTANT TO ADDRESS THE NEEDS OF THE FAMILY										
	Strongly		Agree		Undecided		Disagree		Total	
	N	%	N	%	N	%	N	%	N	%
PRE	155	68.6%	67	29.6%	4	1.8%	0	0.0%	226	100%
POST	45	63.4%	24	33.8%	0	0.0%	1	1.4%	71	100%

Q3: DO YOU BELIEVE IT IS IMPORTANT TO UNDERTSAND THE CULTURAL CONTEXT, RELEVANCE AND DIFFERENCES IN FAMILY RELATIONSHIPS?										
	Strongly		Agree		Undecided		Disagree		Total	
	N	%	N	%	N	%	N	%	N	%
PRE	202	89.4%	23	10.2%	1	0.4%	0	0.0%	226	100%
POST	65	91.6%	6	8.5%	0	0.0%	0	0.0%	71	100%

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**FAMILY ENGAGEMENT AND INCLUSION
PRE (N = 226) AND POST(N = 71) EVALUATION SUMMARY**

JANUARY 2015

TABLE 2

Q4: IN THE LAST 3 MONTHS: WHEN CLIENT DECLINED TO GIVE AUTHORIZATION TO INCLUDE FAMILY MEMBERS, DID YOU RESPOND TO CALLS AND CONTACT INITIATED BY CLIENT'S FAMILY MEMBER?

	Yes		No		Sometimes		Total	
	N	%	N	%	N	%	N	%
PRE	47	29%	113	71%	0	0%	160	100.0%
POST	26	41%	26	41%	11	18%	63	100.0%

Q5: IN THE PAST THREE MONTHS IF CLIENT PROVIDED CONSENT FOR FAMILY INVOLVEMENT IN TREATMENT, HOW OFTEN DID YOU INVOLVE ADULT FAMILY MEMBERS IN CLIENT TREATMENT?

	Always		Often		Sometimes		Rarely		Never		Total	
	N	%	N	%	N	%	N	%	Never	%	N	%
PRE	56	25.6%	96	43.8%	55	25.1%	11	5.0%	1	0.5%	219	100.0%
POST	15	25.4%	25	42.4%	13	22.0%	0	0.0%	6	10.2%	59	100.0%

Q6: IRRESPECTIVE OF A CLIENT'S AUTHORIZATION TO INCLUDE A FAMILY MEMBER IN TREATMENT, BASED ON YOUR CURRENT KNOWLEDGE TRAINING AND EXPERIENCE, HOW CONFIDENT ARE YOU IN INCLUDING FAMILY IN CLIENT TREATMENT?

	Completely Confident		Somewhat Confident		Little Confident		Unsure		Not Confident		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
PRE	135	61%	81	37%	2	1%	2	1%	1	0%	221	100.0%
POST	47	69%	19	28%	0	0%	0	0%	0	0%	68	100%

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**FAMILY ENGAGEMENT AND INCLUSION
PRE (N = 226) AND POST(N = 71) EVALUATION SUMMARY
JANUARY 2015**

TABLE 2

Q7: HOW AWARE ARE YOU OF COMMUNITY PSYCHO-EDUCATIONAL CLASSES IN YOUR AREA?												
	Very Aware		Aware		Somewhat Aware		Very Little Awareness		None		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
PRE	32	14.2%	57	25.3%	92	40.9%	37	16.4%	7	3.1%	225	100.0%
POST	11	16.4%	20	29.9%	21	31.3%	12	17.9%	3	4.5%	67	100.0%

Q8: IN THE PAST THREE MONTHS IRRESPECTIVE OF CLIENT AUTHORIZATION TO INCLUDE THEIR FAMILY IN TREATMENT, HOW OFTEN DID YOU REFER FAMILIES TO AVAILABLE PSYCHO-EDUCATIONAL CLASSES?												
	Always		Often		Sometimes		Rarely		Never		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
PRE	23	11%	66	30%	81	37%	28	13%	19	9%	217	100%
POST	9	13%	10	15%	17	25%	6	9%	20	30%	67	100%

Note: In January 2015 out of the 226 Baseline (Pre) Survey respondents, 71 had completed the follow-up (Post) survey. By March 2015, 92 baseline survey respondents had completed the follow-up (Post) survey of which 78 surveys had complete data for Matched Pair Analysis.